## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10815.073

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
_			(Colum	(Column 1)		(Column 2)		TYPE		OR		ENTITY
TOTAL CLAIMS			19				1	RATE	FEE		RATE	FEE
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.0	0 OR	BASIC FEE	770.00
T	OTAL CHARGE	ABLE CLAIMS	/9 minus 20=		• /			X\$ 9=		OR	X\$18=	
ΙN	DEPENDENT (	CLAIMS	) minus 3 =					X43=		OR	X86=	
М	ULTIPLE DEPE	NDENT CLAIM F	RESENT					+145=		OR	+290=	
* 1	f the differenc	e in column 1 is	less than z	ero, enter	"0" in c	column 2		TOTAL	+	OR	TOTAL	770
	(	CLAIMS AS A	MENDE	IENDED - PART II					<u> </u>		OTHER	THAN
(Column 1)				(Colum		(Column 3)		SMALL	ENTITY	OR	SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-]	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	·	=		X\$ 9=		OR	X\$18=	
AME	Independent	<u> </u> *	Minus	***		=	ſ	X43=		OR	X86=	
	FIRST PRESI	ENTATION OF MI	ULTIPLE DEF	PENDENT	CLAIM		ı	+145=		1 ]	+290=	
							L	TOTAL		OR	TOTAL	
							A	DDIT. FEE		JOR ,	ADDIT. FEE	
		(Column 1)	T	(Colum HIGHE		(Column 3)	_			<b>7</b> 1		
AMENDMENT B		REMAINING AFTER AMENDMENT	•	NUMBI PREVIOL PAID F	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* :	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MU	Minus	###	21 0124		ſ	X43=		OR	X86=	
	THOTFICSE	TATION OF MC	CHPLE DEF	ENDENT	CAIIVI			+145=		OR	+290=	
							Δ1	TOTAL DDIT. FEE		OR .	TOTAL DDIT. FEE	
(Column 1) (Column 2) (Column 3)									•	·		•
<u> </u>	`	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ST R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus '	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<b>=</b> .		X43=			X86=	•
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
• 14	the entry in colum	nn 1 ie loes than the			r in anter	ma 2	Ŀ	+145=		OR _	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***OFTAL ADDIT. FEE												
T	he "Highest Num	nber Previously Paid ber Previously Paid	For (Total or I	ndependent	ss the h	ઝ, emer ૅંઝ.* ighest number f	ound	in the appr	opriate box	in colur	nn 1.	